

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L16984

1. Corporation Name
PAPYRUS INTERNATIONAL, INC.

Principal Place of Business

% MOHAMMAD REZK
2905 N.W. 116TH TERR
CORAL SPRINGS FL 33065

Mailing Address

% MOHAMMAD REZK
2905 N.W. 116TH TERR
CORAL SPRINGS FL 33065

FILED
Apr 06, 1999 8:00 am
Secretary of State

04-06-1999 90031 008 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/19/1989

4. FEI Number

65-0164009

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 3245 N. STATE RD. 7

2a. Mailing Address

26 3245 N. STATE RD. 7

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 MARGATE, FL

City & State

28 MARGATE, FL

Zip

24 33063

Country

25 BROWARD

Zip

29 33063

Country

30 BROWARD

9. Name and Address of Current Registered Agent

REZK, MOHAMMAD

2905 N.W. 116TH TERR
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name

REZK, MOHAMMAD

82 Street Address (P.O. Box Number is Not Acceptable)

3245 N. STATE RD. 7

83

84 City

MARGATE

FL

85 Zip Code

33063

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME REZK, MOHAMMAD
STREET ADDRESS 2905 N.W. 116TH TERR
CITY-ST-ZIP CORAL SPRINGS FL

TITLE D ☐ DELETE

NAME REZK, MOHSEN
STREET ADDRESS 2905 N.W. 116TH TERR
CITY-ST-ZIP CORAL SPRINGS FL

TITLE D ☐ DELETE

NAME REZK, LAURA
STREET ADDRESS 2905 N.W. 116TH TERR
CITY-ST-ZIP CORAL SPRINGS FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME REZK, MOHAMMAD

1.3 STREET ADDRESS 3245 N. STATE RD. 7

1.4 CITY-ST-ZIP MARGATE, FL 33063

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME REZK, MOHAMMAD

2.3 STREET ADDRESS 3245 N. STATE RD. 7

2.4 CITY-ST-ZIP MARGATE, FL 33063

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME REZK, MOHAMMAD

3.3 STREET ADDRESS 3245 N. STATE RD. 7

3.4 CITY-ST-ZIP MARGATE, FL 33063

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-99

Date

954-973-1524

Daytime Phone #

CR2E034 (1/1/98)